

This document is scheduled to be published in the Federal Register on 12/17/2015 and available online at http://federalregister.gov/a/2015-31743, and on FDsys.gov

4191-02-U

SOCIAL SECURITY ADMINISTRATION

[Docket No: SSA-2015-0073]

Agency Information Collection Activities: Proposed Request and Comment Request

The Social Security Administration (SSA) publishes a list of information collection packages

requiring clearance by the Office of Management and Budget (OMB) in compliance with Public

Law 104-13, the Paperwork Reduction Act of 1995, effective October 1, 1995. This notice

includes revisions of OMB-approved information collections.

SSA is soliciting comments on the accuracy of the agency's burden estimate; the need for the

information; its practical utility; ways to enhance its quality, utility, and clarity; and ways to

minimize burden on respondents, including the use of automated collection techniques or other

forms of information technology. Mail, email, or fax your comments and recommendations on

the information collection(s) to the OMB Desk Officer and SSA Reports Clearance Officer at the

following addresses or fax numbers.

(OMB)

Office of Management and Budget

Attn: Desk Officer for SSA

Fax: 202-395-6974

Email address: OIRA\_Submission@omb.eop.gov

(SSA)

Social Security Administration, OLCA

Attn: Reports Clearance Director

3100 West High Rise

6401 Security Blvd.

Baltimore, MD 21235

Fax: 410-966-2830

Email address: OR.Reports.Clearance@ssa.gov

Or you may submit your comments online through www.regulations.gov, referencing Docket ID Number [SSA-2015-0073].

I. The information collection below is pending at SSA. SSA will submit it to OMB within 60 days from the date of this notice. To be sure we consider your comments, we must receive them no later than [INSERT DATE 60 DAYS AFTER DATE OF **PUBLICATION IN THE FEDERAL REGISTER**]. Individuals can obtain copies of the collection instruments by writing to the above email address.

Application for Widow's or Widower's Insurance Benefits -- 20 CFR 404.335-**404.338, & 404.603 -- 0960-0004.** Section 2029(e) and 202(f) of the Social Security Act set forth the requirements for entitlement to widow(er)'s benefits, including the requirements to file an application. For SSA to make a formal determination for entitlement to widow(er)'s benefits, we use Form SSA-10-BK to determine whether an applicant meets the statutory and regulatory conditions for

entitlement to widow(er)'s Title II benefits. SSA employees interview individuals applying for benefits either face-to-face or via telephone and enter the information on the paper form or into the Modernized Claims System (MCS). The respondents are applicants for widow(er)'s benefits.

Type of Request: Revision of an OMB-approved information collection.

Modality of Completion	Number of Responses	Frequency of Response	Average Burden Per Response (minutes)	Estimated Total Annual Burden (hours)
SSA-10-BK	2,045	1	15	511
paper version				
SSA-10-BK	453,509	1	14	105,819
MCS version				
Totals	455,554			106,330

II. SSA submitted the information collection below to OMB for clearance. Your comments regarding the information collection would be most useful if OMB and SSA receive them 30 days from the date of this publication. To be sure we consider your comments, we must receive them no later than [INSERT DATE 30 DAYS]

## AFTER DATE OF PUBLICATION IN THE FEDERAL REGISTER].

Individuals can obtain copies of the OMB clearance package by writing to OR.Reports.Clearance@ssa.gov.

Vocational Rehabilitation Provider Claim -- 20 CFR 404.2108(b),
404.2117(c)(1)&(2), 404.2101(b)&(c), 404.2121(a), 416.2208(b), 416.2217(c)(1)
& (2), 416.2201(b)&(c), 416.2221(a) -- 0960-0310. State vocational rehabilitation
(VR) agencies submit Form SSA-199 to SSA to obtain reimbursement of costs incurred for providing VR services. SSA requires state VR agencies to submit

reimbursement claims for the following categories: (1) claiming reimbursement for VR services provided; (2) certifying adherence to cost containment policies and procedures; and (3) preparing causality statements. The respondents mail the paper copy of the SSA-199 to SSA for consideration and approval of the claim for reimbursement of costs incurred for SSA beneficiaries. For claims certifying adherence to cost containment policies and procedures, or for preparing causality statements, State VR agencies submit written requests as stipulated in SSA's regulations within the Code of Federal Regulations. In most containment policies and procedures as well as causality statements prior to determining whether to reimburse State VR agencies. SSA uses the information on the SSA-199, along with the written documentation, to determine whether, and how much, to pay State VR agencies under SSA's VR program. Respondents are State VR agencies offering vocational and employment services to Social Security and Supplemental Security Income (SSI) recipients.

Type of Request: Revision of an OMB-approved information collection.

Modality of Completion	Number of Responses	Frequency of Response	(Number of Responses)	Average Burden Per Response (minutes)	Estimated Total Annual Burden (hours)
SSA-199 CFR 404.2108 & 416.2208	80	160	(12,800)	23	4,907
CFR 404.2117 & 416.2217 Written requests	80	1	(80)	60	80
CFR 404.2121 &	80	2.5	(200)	100	333

416.2221			
Written			
requests			
Total	80	(13,080)	5,320

Dated: December 14, 2015.

Naomi R. Sipple

Reports Clearance Officer

Social Security Administration

[FR Doc. 2015-31743 Filed: 12/16/2015 8:45 am; Publication Date: 12/17/2015]